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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2016 NOV 21 AM 6:56

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NOV 28 2016

COVER LETTER

Department of State
New Filing Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: WD Brand BBQ Sauce & Rubs, Inc.

(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Dominick A Minotti, Jr.

Name (Printed or typed)

508 N 5th Street

Address

Lake Wales, FL 33853

City, State & Zip

828-371.1657 or 828.371.0044

Daytime Telephone number

djminotti1957@gmail.com

E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

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ARTICLE I NAME

The name of the corporation shall be: WD Brand BBQ Sauce & Rubs, Inc.

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ARTICLE II PRINCIPAL OFFICE

Principal street address

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
Mailing address, if different, is

508 N 5th Street

948 Redfield Drive

Lake Wales, FL 33853

Clyde, NC 28721

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To develop and sell both retail and wholesale the goods made both
BBQ sauces and Rubs for the preparation, processing, and cooking of foods.

ARTICLE IV SHARES

The number of shares of stock is: 10,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Wana D. Minotti, President

Name and Title: _____

Address 508 N 5th Street

Address: _____

Lake Wales, FL 33853

Name and Title: Dominick A. Minotti, Jr., Secretary

Name and Title: _____

Address 508 N 5th Street

Address: _____

Lake Wales, FL 33853

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Dominick A. Minotti, Jr.

Address: 508 N 5th Street

Lake Wales, FL 33853

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Wana D. Minotti

Address: 508 N 5th Street

Lake Wales, FL 33853

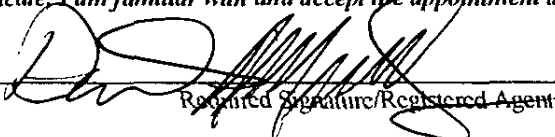
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Required Signature/Registered Agent

11-10-16

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.



Required Signature/Incorporator

11-10-16

Date